MEDICAL CERTIFICATE

(For Employment)

INSTRUCTIONS

- a. This medical certificate should be accomplished by a licensed government physician.
- b. Attach this certificate to original appointment, transfer and reemployment.
- c. The results of the following pre-employment medical/physical/psychological must be attached to this form:
 - ☐ Blood Test
 - Urinalysis
 - ☐ Chest X-Ray
 - Drug Test
 - Psychological Test
 - Neuro-Psychiatric Examination (if applicable)

FOR THE PROPOSED APPOINTEE

ADDRESS	ILLA, RI	VSW, BAYBAY		
GADALUPE, BAYBAY CITY				
AGE	SEX	CIVIL STATUS	PROPOSED POSITION	
13	F	MARRIED	ASSDC. PROT. 1	

FOR THE LICENSED GOVERNMENT PHYSICIAN

I hereby certify that I have reviewed and evaluated the attached exa	amination result	s. personally e	xamined the
above named individual and found him/her to be physically and medically	FIT / UNFIT fo	or employment.	
SIGNATURE over PRINTED NAME OF LICENSED GOVERNMENT PHYSICIAN:	OTHER INFORMATION ABOUT THE PROPOSED APPOINTEE		
AGENCY/Affiliation of Licensed Government Physician:	Athron of h		
VW \	flune	Nc ao	Vf-
LICENSE NO.	HEIGHT (M) Bare Foot	WEIGHT (KG)	BLOOD TYPE
88,	5.2"	02.3 kgl	D
OFFICIAL DESIGNATION	DATE EXAMINED		
CHIEF OF HOSPUTAL I	10:4-2012		